PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/810,821			ing Date 29/2004	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
Н	FOR	L	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	<u> </u>	RATE (\$)	FEE (\$)	
	BASIC FEE	-	N/A	LD NO	N/A		N/A	TEE (a)	i	N/A	TEE (0)	
┢	(37 CFR 1.16(a), (b), s SEARCH FEF	or (c))	N/A				21/4		ł			
౼	(37 CFR 1.16(k), (i), (i)		N/A N/A		N/A N/A		N/A		ł	N/A		
	(37 CFR 1.16(o), (p), ( FAL CLAIMS		minus 20 =		N/A		N/A x s =		OR	N/A x s =		
INE	CFR 1.16(i)) EPENDENT CLAIM	s	minus 20 = *				x \$ =		OK	x s =		
(37	CFR 1.16(h))	If the	If the specification and draw		ne overed 100	1	A# -		ı	^* -		
	APPLICATION SIZE (37 CFR 1.18(s))	FEE shee is \$2 addit	sheets of paper, the application s is \$250 (\$125 for small entity) for additional 50 sheets or fraction th 35 U.S.C. 41(a)(1)(G) and 37 CF									
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))								1			
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		1	TOTAL		
									ER THAN			
AMENDMENT		CLAIMS		HIGHEST		1 1			Г			
	07/28/2008	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16())	· 67	Minus	<b>**</b> 80	= 0	1	x \$ =		OR	X \$50=	0	
	Independent (37 CFR 1,16(h))	• 2	Minus	<b></b> 3	= 0	1	x \$ =		OR	X \$210=	0	
	Application Size Fee (37 CFR 1.16(s))											
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
(Column 1) (Column 2) (Column 3)												
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.1601)		Minus		=	1	x \$ =		OR	x s =		
	Independent (37 CFR 1,16(h))	*	Minus	***		]	x \$ =		OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))					]			]			
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					1			OR			
									OR	TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.												

This collection of information is equated by 37 CER 1.10. The information is required to obtain or retain a benefit by the public which is in life (and by the USETO to noceess) an implication. Confidentially is governed by 85 USE of 22 and 37 CER 1.4. If this collection is estimated to state 27 animates to complete in condition gathering, preparing, and submitting the completed application form to the USETO. Time will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or segregations form double be sent to the Child information Officer. USE of the animate of time you require to complete this form and/or segregations for motioning this burfule, also table a sent to the Child information Officer. USE of the animate of Commence, D.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO C. Commissionment of Portains 1, Po.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO C. Commissionment of Portains 1, Po.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO C. Commissionment of the complete of Portains 1, Po.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO C. Commission of the COMPLETE SEND TO C. COMPLETE SEND TO THIS ADDRESS SEND TO C. COMPLETE SEND TO C. COMPLETE